

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          | 12     | 2/16     |
| FORMALITY REVIEW          | Rm       | 781    | 03-02-01 |
| RESPONSE FORMALITY REVIEW | T2       | 947    | 10-02-01 |
|                           |          |        |          |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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617  
 10-02-01